DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted with Initial Filing

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))

<u>' </u>	
Attorney Docket Numb	er
First Named Invent r	MANUEL MEITIN
COMPLET	E IF KNOWN
Application Number	
Filing Date	
Art Unit	
Examiner Name	

	required)	Examiner Hame			
As the below named inventor, I hereby declare that:					
My residence, mailing address, and c	citizenship are as stated belo	w next to my name.			
I believe I am the original and first inv	ventor of the subject matter w	which is claimed and for whi	ch a patent is sough	nt on the invention entitled:	
HYDROMECHANICAL A AUTOMOBILES.	UTOMATIC TRANS	MISSION FOR MO	OTORCYCLES	AND	
(Title of the Invention)					
the specification of which					
X is attached hereto					
OR [
was filed on (MM/DD/YYYY)		as United States A	pplication Number o	r PCT International	
L					
Application Number	and was amende	ed on (MM/DD/YYYY)		(if applicable).	
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.					
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breed r's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attach d? YES NO	
Additional foreign application nu	mb rs are listed on a supple	em ntal priority data sheet l	PTO/SB/02B attache	ed hereto:	

PTO/SB/01 (10-01)

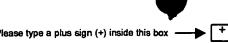
Ap, Led for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

	Direct all correspondence to: Customer Num or Bar Code Li		OR X Com	respondence address below		
	PEDRO QUINONES Name					
	2800 SW 26 St Address					
	City		FLORIDA State	33133 2116 ZIP		
	Country USA	305 Telephone	4610191	305 4765437 Fax		
7						
Tree.	NAME OF SOLE OR FIRST INVENTOR:	A petition ha	as been filed for this unsign	ned inventor		
1.1	Given Name (first and middle [if any])		Family Name MEITIN or Surname			
The state of the s	Inv ntor's William Signature			Date		
(in)	Residence: City LAS PALMAS	CANARY IS	SLAND SPAIN Country	SPANIARD Citizenship		
The Roll of the State of the St	2800 SW 26 St Mailing Address					
End#	City	FLORIDA State	33133 2116 ZIP	USA Country		
İ	NAME OF SECOND INVENTOR:	A petition has	been filed for this unsigned	d inventor		
	Given Name (first and middle [if any]) DOUGLAS MANU	1 '	Family Name MEITIN or Surname			
	Inventor's 204 Signature			Date		
	Residence: City LAS PALMAS	CANARY IS	SLAND SPAIN Country	Cuban Citizenship		
	Mailing Address CALLE BLASCO IBANE	£Z 19				
-	City LAS PALMAS		LAND ZIPSPAIN	35006 Country		
	Additi nal inv ntors are being named on the x s	supplem ntal Additi r	nal Inv nt r(s) sheet(s) PTO/SB/C	J2A attached h reto.		

April 16 to the second




Please type a plus sign (+) inside this box

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page ___ of ___

Name of Additional Joint Inventor, if	any:			A petition h	as been filed	for th	is unsigned inventor
Given Name (first and middle [if a	iny])	Family Name or Surname			mame		
PEDRO				QUINONES			
Inventor's Signature						I	FEBRUARY 14-02 Date
Residence: City MIAMI	FI Sta	ORIDA te	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	USA Country		0	AMERICAN Mizenship
Mailing Address					 		
Mailing Address 2800 SW 26	st						
City MIAMI	F I Sta	ORIDA		33133 ZIP	2116 c	ountr	USA
Name of Additional Joint Inventor, if	any:			A petition ha	as been filed	for this	unsigned inventor
Given Name (first and middle [if a	any])				Family Name	or Su	ımame
Inventor's Signature							Date
Residence: City	St	ate		Country			Citizenship
Mailing Address							
Mailing Address							
manning Address							
City	St	ate		ZIP		Cou	ntry
Name of Additional Joint Inventor, if any:							
Given Name (first and middle [if any]) Family Name or Sumame							
Inventor's Signature							Date
Residence: City	Star	te		Country			Citizenship
Mailing Address							
Mailing Address							
City State			71D		Co	untry	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time—you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/09 (12-97) for use through 9/30/00. OMB 0851-0031 be: U.S. DEPARTMENT OF COMMERCE less it displays a valid CMB control number.

Docket Number (Optional)

STATEMENT CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) & 1.27(b))-INDEPENDENT INVENTOR

M	MANUEL MEITIN, DOUGLAS N	MEITIN, PEDRO QUINONES.				
Applicant, Patentee, or Identifier.						
Application or Patent No.:						
Filedorissued: Hidromecha	nical automatic transmi	ssion for				
Title: motorcycle	es and automobiles.					
As a below named inventor, I hereby state that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees to the Patent and Trademark Office described in:						
	vith with title as listed above.					
X the application identified abo						
patent identified above.						
	and an iinanged and am under no obligat	tion under contract or law to assign.				
	. :- Maiayaanan 19 9 TU DARDI WID WID WID III	I CHAILLA AS ALL II I GEDENIGEN II I I I I I I I I I I I I I I I I I				
da= 27 CED 4 O/o) if that namen	had made the invention, or to any concerr .9(d) or a nonprofit organization under 37 C	I MILICII MODIO LIOI dagiil) co				
		I I				
Each person, concern, or organization under contract or law to	ation to which I have assigned, granted, co assign, grant, convey, or license any right	nveyed, or licensed or am under an incer and incertain is in the invention is listed below:				
汉文 No such person, concern, or organization exists.						
Each such person, concern, or organization is listed below.						
· ·						
Separate statements are required from each named person, concern, or organization having rights to the invention						
stating their status as small entities. (37 CFR 1.27)						
I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any						
entitlement to small entity status prior to paying, or at the time of paying, the time of paying						
MANUEL MEITIN	DOUGLAS M MEITIN	PEDRO QUINONES				
NAME OF INVENTOR	NAMEOFINVENTOR	NAME OF INVENTOR				
-1./-	Me	CEL !				
Herin	Signature of inventor	Signature of inventor				
Signature of inventor	Signature of the comme	79				
FEBRUARY 12/2002	JANUARY 28/2002	FEBRUARY 12/2002				
Date	Date	Date				

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Palent and Trademark Office, washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.